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APPLICANTS Sheldon B. Moberg, Thousand Oaks, CA; Ian B. Hanson, El Segundo, CA;				
** CONTINUING DATA ***** This application is a CIP of 09/698,783 10/27/2000 PAT 6,800,071				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/21/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY CA	SHEETS DRAWING 26	TOTAL CLAIMS 31
		INDEPENDENT CLAIMS 4		
ADDRESS MEDTRONIC MINIMED, INC. 18000 Devonshire Street Northridge, CA91325-1219				
TITLE METHOD AND APPARATUS FOR DETECTING ERRORS, FLUID PRESSURE, AND OCCLUSIONS IN AN AMBULATORY INFUSION PUMP				
FILING FEE RECEIVED 1054	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	